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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 678-1243 (P11348)  
First Inventor Terence Edwin DODGSON, et al.  
Title Integrated Modulators and Demodulators  
Express Mail Label No. EV333228346US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Address to: Mail Stop Patent Application  
Commissioner for Patents, P.O.  
Box 1450, Alexandria, VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 29]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 14]
5. Oath or Declaration [Total Pages ]
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement [Power of Attorney]  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Ck. \$750.00 (filing fee)
17. ☒ Other: Ck. \$40.00 (recording fee)

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

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Name (Print/Type) Paul J. Farrell Registration No. (Attorney/Agent) 33,494  
Signature [Signature] Date August 25, 2003

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EV333228346US addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: August 25, 2003

(Name) Douglas M. Owens III

22386 U.S. PTO  
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08/25/03

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|   |  |                          |                               |
|---|--|--------------------------|-------------------------------|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p> |  | <b>Complete if Known</b> |                               |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       |                               |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 750.00   |  | Filing Date              | concurrent herewith           |
|   |  | First Named Inventor     | Terence Edwin DODGSON, et al. |
|   |  | Examiner Name            |                               |
|   |  | Art Unit                 |                               |
|   |  | Attorney Docket No.      | 678-1243 (P11348)             |

| METHOD OF PAYMENT (check all that apply)  | FEE CALCULATION (continued)   |              |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|---|--------------|--------------|--|-----------------|-----------------|----------|----------|----------|----------|----------|------|------|------|--------------------|-------------------------------------|------|------|------|------|-------------------|--|------|------|------|------|------------------|---------------------------|------|------|-------|------|--------------------|--|------|------|------|------|------------------------|--|--|------|--------|--------------|--------|---|--|----------|-----|--------------|----|--|---|------|-------|------|------|---|---|--------|-----|------|-----|--|------|--------------------|-------|------|-----|---|--|------|-------|--------------|-----|--|--|-----------------|----------|----------|----------|------------------|----------|------|-----|------|-----|--|--|------|-----|------|-----|-----------------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|--|--|------|-------|------|-----|--|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: 04-1121<br>Deposit Account Name: Dilworth & Barrese LLP<br><br>The Commissioner is authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  | <h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> | Large Entity |              | Small Entity   |                 | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130  | 2051 | 65                 | Surcharge - late filing fee or oath |      | 1052 | 50   | 2052 | 25                | Surcharge - late provisional filing fee or cover sheet |      | 1053 | 130  | 1053 | 130              | Non-English specification |      | 1812 | 2,520 | 1812 | 2,520              | For filing a request for <i>ex parte</i> reexamination |      | 1804 | 920* | 1804 | 920*                   | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840* | 1805         | 1,840* | Requesting publication of SIR after Examiner action |  | 1251     | 110 | 2251         | 55 | Extension for reply within first month |   | 1252 | 410   | 2252 | 205  | Extension for reply within second month |   | 1253   | 930 | 2253 | 465 | Extension for reply within third month |      | 1254               | 1,450 | 2254 | 725 | Extension for reply within fourth month |  | 1255 | 1,970 | 2255         | 985 | Extension for reply within fifth month |  | 1401            | 320      | 2401     | 160      | Notice of Appeal |          | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing          |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable                   |  | 1453 | 1,300 | 2453 | 650 | Petition to revive - unintentional                         |  | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |   | Small Entity |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)  | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130   | 2051         | 65           | Surcharge - late filing fee or oath  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50  | 2052         | 25           | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130   | 1053         | 130          | Non-English specification  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520   | 1812         | 2,520        | For filing a request for <i>ex parte</i> reexamination                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*  | 1804         | 920*         | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*  | 1805         | 1,840*       | Requesting publication of SIR after Examiner action                        |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110   | 2251         | 55           | Extension for reply within first month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410   | 2252         | 205          | Extension for reply within second month                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930   | 2253         | 465          | Extension for reply within third month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450   | 2254         | 725          | Extension for reply within fourth month                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970   | 2255         | 985          | Extension for reply within fifth month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320   | 2401         | 160          | Notice of Appeal   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320   | 2402         | 160          | Filing a brief in support of an appeal                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280   | 2403         | 140          | Request for oral hearing   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510   | 1451         | 1,510        | Petition to institute a public use proceeding                              |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110   | 2452         | 55           | Petition to revive - unavoidable   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300   | 2453         | 650          | Petition to revive - unintentional   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300   | 2501         | 650          | Utility issue fee (or reissue)   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470   | 2502         | 235          | Design issue fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630   | 2503         | 315          | Plant issue fee  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130   | 1460         | 130          | Petitions to the Commissioner  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50  | 1807         | 50           | Processing fee under 37 CFR 1.17(q)  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180   | 1806         | 180          | Submission of Information Disclosure Stmt                                  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40  | 8021         | 40           | Recording each patent assignment per property (times number of properties) |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750   | 2809         | 375          | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750   | 2810         | 375          | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750   | 2801         | 375          | Request for Continued Examination (RCE)                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900   | 1802         | 900          | Request for expedited examination of a design application                  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <h3 style="margin: 0;">1. BASIC FILING FEE</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>750</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <p style="text-align: right; margin-top: 5px;"><b>SUBTOTAL (1)</b> (\$ ) 750.00</p> | Large Entity  |              | Small Entity |  | Fee Description | Fee Paid        | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1001     | 750  | 2001 | 375  | Utility filing fee | 750                                 | 1002 | 330  | 2002 | 165  | Design filing fee |  | 1003 | 520  | 2003 | 260  | Plant filing fee |                           | 1004 | 750  | 2004  | 375  | Reissue filing fee |  | 1005 | 160  | 2005 | 80   | Provisional filing fee |  | <h3 style="margin: 0;">2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h3> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>18</td> <td>-20** =</td> <td>0</td> <td>x</td> <td>18.00</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>-3** =</td> <td>0</td> <td>x</td> <td>84</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>=</td> <td>0</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small; margin-top: 5px;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> <p style="text-align: right; margin-top: 5px;"><b>SUBTOTAL (2)</b> (\$ ) 0.00</p> |      |        | Extra Claims |        | Fee from below                                      |  | Fee Paid |     | Total Claims | 18 | -20** =                                | 0 | x    | 18.00 | =    | 0.00 | Independent Claims                      | 3 | -3** = | 0   | x    | 84  | =                                      | 0.00 | Multiple Dependent |       |      |     |   |  | =    | 0     | Large Entity |     | Small Entity                           |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code         | Fee (\$) | 1202 | 18  | 2202 | 9   | Claims in excess of 20                 |  | 1201 | 84  | 2201 | 42  | Independent claims in excess of 3 |  | 1203 | 280   | 2203 | 140   | Multiple dependent claim, if not paid         |  | 1204 | 84  | 2204 | 42 | ** Reissue independent claims over original patent |  | 1205 | 18    | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |   | Small Entity |              | Fee Description  |                 |                 | Fee Paid |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)  | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750   | 2001         | 375          | Utility filing fee   | 750             |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330   | 2002         | 165          | Design filing fee  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520   | 2003         | 260          | Plant filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750   | 2004         | 375          | Reissue filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160   | 2005         | 80           | Provisional filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|   |   | Extra Claims |              | Fee from below   |                 | Fee Paid        |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  | 18  | -20** =      | 0            | x  | 18.00           | =               | 0.00     |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Independent Claims  | 3   | -3** =       | 0            | x  | 84              | =               | 0.00     |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Multiple Dependent  |   |              |              |  |                 | =               | 0        |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |   | Small Entity |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)  | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18  | 2202         | 9            | Claims in excess of 20   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84  | 2201         | 42           | Independent claims in excess of 3  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280   | 2203         | 140          | Multiple dependent claim, if not paid                                      |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84  | 2204         | 42           | ** Reissue independent claims over original patent                         |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18  | 2205         | 9            | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |   |      |       |      |      |   |   |        |     |      |     |  |      |                    |       |      |     |   |  |      |       |              |     |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

\*\*or number previously paid, if greater; For Reissues, see above

\*Reduced by Basic Filing Fee Paid

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| SUBMITTED BY      |                 | (Complete if applicable)          |                 |
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|                   |                 | Date                              | August 25, 2003 |

**CERTIFICATION UNDER 37 C.F.R. § 1.10**

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EV333228346US addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: August 25, 2003

(Name) Douglas M. Owens III